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Motorola, Inc.

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Date:

Examiner: Linh L.D. Son

To:

Art Unit: 2614-2135

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Location:

United States Patent and Trademark Office

OCT 18 2005

Fax No.:

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From:

Attorney: Lawrence T. Cullen Reg. No. 44,489

Subject:

Serial No. 10/002,306 Filed: 11/02/2001

Docket No. D2805

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MESSAGE:

Enclosed herewith, please find Amendment in response to the Office action mailed on June 30, 2005, Petitional for 1 Month Extension of Time, and Fee transmittal, including fee for Disclaimer, for filing in the above-identified application.

PLEASE GIVE THESE PAPERS TO:

EXAMINER:

Linh L.D. Son

GROUP ART UNIT:

-2614 2135

ATTORNEY DOCKET NO.:

D2805

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Fees pursuant to the Consoldiated Appropriations Act. 2005 (H.R. 4818)				Application Number			,306	OCT 17	
FEE TRANSMITTAL				Filing Date			nber 2, 2001	001 17	LUUS
For FY 2005 Applicant claims small entity status. See 37 CFR 1.27				First Named Inventor			M. Smith]
				Examiner Name			D. Son		1
				Group Art Unit			-2614 2135		
TOTAL AMOUNT OF PAYMENT (\$) 250				Attomey Docket No.			88		Ĺ
METHOD OF PAYME	NT (check	all that apply)]
		Money Order			***		identify):		7
For the above Charge for Charge a	identified (ee(s) indications additions CFR 1.16 (at this form may	al fee(s) or underpay and 1.17 become public. Credit o	Director Director	is hereby autho Charge fee(s) in fee(s)	orized to dicated Credit a	: (chec below, ny ove	k all that app except for rpayments	the filing fee	
FEE CALCULATION									1
1. BASIC FILING, S		ID EXAMINATION F	FEES			-	·		┪
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	TO (M)	Small Entity	-	Small Entity	Transfer		Small Entity	Essa Baid (6)	l
Application Type	Fee (\$) 300		<u>e (\$)</u> 500	<u>Fee (\$)</u> 250	Fee (\$)	1	<u>Fee (\$)</u> 100	Fees Paid (\$)	
Utility	200		100	50	130		65		1
Design			300	150	160		80		
Plant	200			250	600		300		
Reissue Provisional	300 200		500 0	250 0	0		0		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each Independent claim over 3 or, for Reissues, each Independent claim more than in the original patent Each Independent claims Multiple dependent claims Total Claims Fee (\$) Fee Paid (\$) HP=highest number of total claims pad for, if greater than 20 Small Entity Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$)									
Indep. Claims - 3 or HP= HP=highest number of indepen	Extra Clai	x =	Fee Paid	(\$)					
3. APPLICATION SI If the specification and dra or fraction thereof. See 35 Total Sheets - 100 ~	wings exceed	1)(G) and 37 CFR 1.16(s)	i). ber of each ac	size fee due is \$25 dditional 50 or traction nund up to a whole n	lhereof	Fe	e (\$)	additional 50 sheets	
4. OTHER FEE(S) Petition for 1 Mo Extension	ı of Time						\$120	Fee Paid (\$)	
Terminal Disclaimer	-						\$130		
SUBMITTED BY	Complete (f applicable)								
Name (Print/Type)	Lawrence	T. Cullen		Registration No.	44,48	9 -	Telephone	215-323-1797	4
Qitura	. 5 g	-/-				Data	16/17/2	~	1

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